## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/586465

CLAIMS AS FILED - PART I  (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
U.S.	NATIONAL S	TAGE FEES	(500.	<u>'</u>				RATE	FEE		RATE	FEE	
BASI	C FEE		SMALL ENT.	= \$ 150	LARGE ENT. = \$ 300			BASIC FEE	150	OR	BASIC FEE		
EXAN	MINATION FEE		Satisfies PCT Art		All other situations = \$ 100 / \$ 200			EXAM. FEE	100		EXAM. FEE		
SEAF	RCH FEE		U.S. is ISA = \$4 ALL other cour \$ 200 / \$ 4	ntries =		her situations = 250 / \$ 500		SEARCH FEE	200	,	SEARCH FEE		
FEE	FOR EXTRA SI	PEC. PGS.	minu	s 100 =		/ 50 =		X \$ 125 =			X \$ 250 =		
тоти	AL CHARGEAB	LE CLAIMS	33 min	us 20 = ,	* /	13		X \$ 25 =	325	OR	X \$ 50 =		
INDE	PENDENT CLA	AIMS	/ minus 3 = *					X \$ 100 =		OR	·X \$ 200 =		
MUL.	TIPLE DEPEND	DENT CLAIM PRE	ESENT					+ \$ 180 =		OR	+ \$ 360 =		
* If the difference in column 1 is less than zero, enter "0" in column 2							•	TOTAL	775	OR	TOTAL		
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								SMALL ENTITY			OTHER THAN SMALL ENTITY		
AMENDMENT A	33	CLAIMS REMAINING AFTER AMENDMENT	:	HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* 33	Minus	** 3:	3	= 0		X \$ 25 =		OR	X \$ 50 =		
	Independent	* 1	Minus	*** 3		۵ =		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
	<u> </u>							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
ΤB		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
	<u> </u>							TOTAL ADDIT		OR	TOTAL ADDIT.		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. Barbara Campbell, PCT National Stage Division  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													